PRINTED: 04/17/2019 FORM APPROVED

California Department of Public Health (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: B. WING 04/17/2019 CA040000106 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER **400 W MINERAL KING AVE** KAWEAH DELTA MEDICAL CENTER VISALIA, CA 93291 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX CROSS-REFERENCED TO THE APPROPRIATE DATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAĢ TAG DEFICIENCY) E 000 E 000 **Initial Comments** The following reflects the findings of the California Department of Public Health during the investigation of a complaint. Complaint Number: 621852 Representing the Department: 39602, HFEN The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility. One deficiency was issued for complaint number 621852. E 309 E 309, T22 DIV5 CH1 ART3-70217(a)(12) Nursing Service Staff (12) The licensed nurse-to-patient ratio in a specialty care unit shall be 1:5 or fewer at all times. Commencing January 1, 2008, the licensed nurse-to-patient ratio in a specialty care unit shall be 1:4 or fewer at all times. A specialty care unit is defined as a unit which is organized, operated, and maintained to provide care for a specific medical condition or a specific patient population. Services provided in these units are more specialized to meet the needs of patients with the specific condition or disease process than that which is required on medical/surgical units, and is not otherwise covered by subdivision (a). This Statute is not met as evidenced by: Licensing and Certification Division LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE (X6) DATE TITLE

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If continuation sheet 1 of 3

California Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A, BUILDING: CA040000106 04/17/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **400 W MINERAL KING AVE** KAWEAH DELTA MEDICAL CENTER VISALIA, CA 93291 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) E 309 | Continued From page 1 E 309 Based on Interview and record review, the facility falled to maintain a staffing ratio of one nurse to four patients (1:4) on its renal specialty unit, This failure had the potential to result in ineffective nursing care for patients on the renal specialty unit. Findings: During an Interview with the Renal Unit Assistant Nurse Manager (ANM) and review of the unit's staffing documents on 2/12/19, at 11:10 AM, ANM stated the unit is a renal specialty unit, and their staffing ratio is supposed to be 1:4. ANM stated all nurses on the current day shift had more than four patients. The daily unit staffing sheet indicated there were six Registered Nurses (RNs) currently on duty, five with six patients assigned to them. The unit's daily staffing sheets for 2/4/19 through 2/11/19 were reviewed, and indicated the unit was staffed out of ratio on the following dates: 2/4/19 day shift: Three RNs had five patients 2/4/19 night shift: Five RNs had five patients each 2/5/19 day shift: Four RNs had five patients each 2/5/19 night shift: Three RNs had five patients 2/6/19 day shift: Three RNs had five patients 2/6/19 night shift: Four RNs had five patients 2/7/19 day shift: Six RNs had five patients each 2/7/19 night shift: Two RNs had five patients each 2/8/19 day shift: Three RNs had five patients each 2/8/19 night shift: Three RNs had five patients 2/9/19 day shift: Five RNs had five patients each

California Department of Public Health (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: _____ С B, WING CA040000106 04/17/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 400 W MINERAL KING AVE KAWEAH DELTA MEDICAL CENTER VISALIA, CA 93291 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (X4) ID PREFIX (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) E 309 E 309 Continued From page 2 2/9/19 night shift: Four RNs had five patients 2/11/19 day shift: Six RNs had five patients each 2/11/19 night shift: Five RNs had five patients each ANM confirmed the findings. During an interview with RN 1, on 2/12/19, at 12:20 PM, RN 1 stated she currently has slx patients assigned to her. RN 1 stated six patients is "a bit overwhelming."

CDPH Plan of Correction Worksheet – Form 2567 CA# 621852

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on the renal specialty unit.	Human Resources Department in conjunction with nursing leadership is actively working with staffing agencies to contract with traveler nurses and is advertising nationally for full-time permanent Registered Nurses positions. Partnering with local community college nursing programs in an effort to assist with the recruitment and employment of future RN graduates. 3) The 4North Charge Nurses are available to assist staff with any patient care needs as they do not have a patient care assignment.
	Measures of Success: The facility will conduct random weekly audits regarding the total number of licensed nurses within a 24 hour period that will include both day and night shifts on
	4 North to ensure staffing ratios of 1:4 are maintained. The audit will be overseen by the 4 North Nurse Manager or her designee with oversight by the Director of Renal/Oncology/Critical Care Services. The results of this audit will be reviewed and monitored through the organization's
į	quality improvement processes and ultimately reporting to Quality Council.

CDPH Plan of Correction Worksheet – Form 2567 CA# 621852

ID Ton	Statement of Deficiency	CA# 621852	
ID Tag	Statement of Deficiency Initial Comments	Provider's Plan of Correction Response	Completion Date
E 000	The following reflects the findings of the	This Plan of Correction constitutes this facility's written compliance for the alleged deficiencies cited.	N/A
	California Department of Public Health during	Flavoren autoriai Sul Pl. Co. ut a co. a co.	
	the investigation of a complaint.	However, submission of the Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet	
		requirements established by state and federal law.	
	Complaint Number: 621852	7,000,000,000	
	Representing the Department: 39602, HFEN		
	One deficiency was written as a result of the complaint.		
E 309	T22 DIV5 CH1 ART3-70217(a)(12) Nursing	As part of our commitment to comply with licensed nurse to patient ratios (1:4) or	
	Service Staff	fewer at all times on the 4 North unit, the following actions were taken.	
	(12) The licensed Nurse-to-patient ratio in a	The facility will continue to aggressively recruit and retain licensed nurses to	
	specialty care unit shall be 1:5 or fewer at all times. Commencing January 1, 2008, the	meet our needs using the following measures:	
	licensed nurse-to-patient ratio in a specialty	The facility will continue its Student Nurse Intern Program for college work	April 1, 2018
	care unit shall be 1:4 or fewer at all times. A	study. This program is to assist the facility with its recruitment of local RNs.	through present
	specialty care unit is defined as a unit which is	KDMC will continue its RN residency program to allow for an easier, quicker	(ongoing efforts)
	organized, operated, and maintained to	transition to the units for new graduates (107 new graduates have entered	(51.551.6)
	provide care for a specific medical condition or	the program over the last 12 months). The facility continues to hire RNIPs	
	a specific patient population. Services	(registered nurses with interim permits). From April 1, 2018 – March 31,	
	provided in these units are more specialized to	2019, the facility hired 175 Staff RNs in response to its increasing census and	
	meet the needs of patients with the specific	staffing vacancies. As of April 30, 2019, there are 90 Staff RN positions open	
	condition or disease process than that which is	throughout the facility and 50 external applicants. The Medical/Renal-	
	required on medical/surgical units, and is not	4North unit currently has 6 open Staff RN positions of which there are 12	
	otherwise covered by subdivision (a).	applicants and interviews are being coordinated. The facility also recruits	
		RNs from other countries, one RN from Canada will begin employment in	
	This Statute is not met as evidenced by:	August 2019.	
	Based on interview and record review, the	OHA SULLE AND	
	facility failed to maintain a staffing ratio of one	2) Overall current recruitment activity includes advertising, RN Career Fairs, the	June 3, 2019
	nurse to four patients (1:4) on its renal	next schedule for June 3, 2019. RN Recruiter provides regular weekly 1, 3, 30	
	specialty unit. This failure had the potential to	updates to nurse managers with openings as well as reviews biner in S	
	result in ineffective nursing care for patients	advertising opportunities to increase applicant volumes. The facility si	1